

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12	10/29
FORMALITY REVIEW	EP	1125	11/9/01
RESPONSE FORMALITY REVIEW	ST	1021	03/25/02
	EM	1164	03/24/03

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	✓ 7/10/03
2	✓ 7/10/03
3	✓ 7/10/03
4	✓ 7/10/03
5	✓ 7/10/03
6	✓ 7/10/03
7	✓ 7/10/03
8	✓ 7/10/03
9	✓ 7/10/03
10	✓ 7/10/03
11	✓ 7/10/03
12	✓ 7/10/03
13	✓ 7/10/03
14	✓ 7/10/03
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32	✓ 7/10/03
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36	✓ 7/10/03
37	✓ 7/10/03
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39	✓ 7/10/03
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41	✓ 7/10/03
42	✓ 7/10/03
43	✓ 7/10/03
44	✓ 7/10/03
45	✓ 7/10/03
46	✓ 7/10/03
47	✓ 7/10/03
48	✓ 7/10/03
49	✓ 7/10/03
50	✓ 7/10/03

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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826- 5/24/03 3/24/03  
 10/7/01  
 352  
 03/25/02